

**FOC-70 -
DETERMINATION
ON ARREARAGE
(CREDIT
REPORTING)**

Approved, SCAO <div style="display: flex; justify-content: space-between;"> <div style="width: 30%; text-align: center;"> STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY </div> <div style="width: 30%; text-align: center;"> DETERMINATION ON ARREARAGE (CONSUMER REPORTING AGENCY) </div> <div style="width: 30%; text-align: center;"> CASE NO. </div> </div>		Original - Friend of the Court 1st copy - Plaintiff 2nd copy - Defendant
Friend of the Court address		FAX no. Telephone no.

Plaintiff name, address, and telephone no.

Defendant name, address, and telephone no.

TO: _____
 Payer
 (This notice is for the payer. A copy is sent to the payee for his/her information only)

1. Date of review: _____

Officer: _____

2. A notice of arrearage was sent to _____

Name _____

on _____

Date _____

3. A review to object to the reporting of support information was requested by the payer named in the above address.

☐ 4. The payer failed to appear at the hearing and the allegations of the notice are adopted.

5. The person objecting to the reporting of support information ☐ is ☐ is not the person ordered to pay support in this case.

☐ a. The case will be reviewed to identify the correct payer.

☐ b. The Friend of the Court will discontinue reporting and will request deletion of the support information previously submitted to the credit reporting agency.

☐ 6. Support information is currently being reported to a credit reporting agency.

☐ 7. The reportable arrears reflected in the records of the Friend of the Court are correct and the payer will be reported to the credit agency.

☐ 8. The arrears reflected in the records of the Friend of the Court are incorrect. The correct amount is \$ _____.

☐ a. The corrected arrears meet the criteria for reporting and will be reported to a credit reporting agency if not paid within 2 working days after this review.

☐ b. The corrected arrears do not meet the criteria for reporting and will not be reported to a credit reporting agency.

☐ 9. Other:

is _____

Signature _____

MCL 552.512; MSA 25.176(12), MCR 3.208(B)

C 70 (9/96) **DETERMINATION ON ARREARAGE (CONSUMER REPORTING AGENCY)**